

ECY 040-1-14

Rev. 7/97 \* \* f

**APPLICATION** 

# Emergency Drought Request

State of Washington Application for a Water Right Received

For Ecology Use Fee Paid

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM						
Name Robert Charron	Home Tel: (509) 453 - 2138						
Mailing Address 11530 Hwy, 24	Work Tel: (						
City Moree State Va Zip+4 989	36 + FAX: (509) 453 - 6858						
Section 2. CONTACT - PERSON TO CALL  Same as above	ABOUT THE APPLICATION						
Name	Home Tel: (						
Mailing Address	Work Tel: (						
City State Zip+4	+ FAX: ()						
Relationship to applicant							
Section 3. STATEMENT OF INTENT							
The applicant requests a permit to use not more than	ground water source (check only one) for the purpose(s)  . ATTACH A "LEGAL"  ions.) NOTE: A tax parcel number or a plat number is not						
☐ Check if the water use is proposed for a short-term pro	oject. Indicate the period of time that the water will be needed:						
From <u>5 / 15 / 01</u> to <u>9 / 15 / 01</u>							
Section 4. WATER SOURCE							
If SURFACE WATER	If GROUNDWATER						
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for well(s).						
Number of diversions:							
Source flows into (name of body of water):	Size & depth of well(s):						
	16'' - 2200						
LOCATION							
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:							
370' South + 1520' East of the N.W	1. Corner of Section 13-12-20						
1/4 of Section Township Range (E/W	If location of source is platted, complete						
N.E N.W. 13 12 20	Yakima						
	ity Date:						
SEPA: Exempt/Not Exempt FERC License #	Dept. Of Health #						
Date Accepted As Complete By I	Date Returned By WRIA: 3.7						

Appl. No.: 64-32977

A.	Name of system, if named:
В.	Briefly describe your proposed water system. (See instructions.)  Water will be pumped from well & used in both Drip &
	Water will be pumped from well & 4sed in both Drip & Rill irrigation. 200 H.P.
C.	Do you already have any water rights or claims associated with this property or system?  PROVIDE DOCUMENTATION.
200000000000000000000000000000000000000	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.)
B.	Are you within the area of an approved water system?
<b>.</b>	If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	nplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the
	Washington State Department of Health?  If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan?  If yes, when was it approved? Please attach the current approved version of your plan.
Sec. 1997	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION ompleted for all irrigation and agriculture uses.)  Total number of acres to be irrigated:
В.	List total number of acres for other specified agricultural uses:
	Use <u>Hops</u> Acres 307
	Use Acres
	Use Acres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)  Add up the acreage in which you have a controlling interest, including only:  ‡ Acreage irrigated under water rights acquired after December 8, 1977;  ‡ Acreage proposed to be irrigated under this application;  ‡ Acreage proposed to be irrigated under other pending application(s).
	<ol> <li>Is the combined acreage greater than 2000 acres?</li> <li>Do you have a controlling interest in a Family Farm Development Permit?</li> <li>If yes, enter permit no.:</li></ol>
E.	Farm uses: Stockwater - Total # of animals Animal Type (If dairy cattle, see below)
	Dairy - # Milking # Non-milking

### Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Approx. 6 mi. East of Moxee on Hiway. 24. Turn on Den Beste road

+ go East 1.4 miles. Well is located on South Side of Den Beste road

about 300' off road.

# Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

#### Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

□ NO

Section 14 is owned by Gordon Meacham
P.O. Box 280

Moxee, WA 98936

B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

⊠ YES □ NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

4-20-01 Date

Date

Landowner for place of use (if same as applicant, write "same")

This land is in the	Roza Irriga	tion Distr	ict
East of Moxee.	, ,		
projected @ well Current estimate	below 70	% this	Season
Current estimate	28%		
We are returning your application for the follo	wing reason(s):		
Examination fee was not enclosed			O CASHIER, 28, LACEY, WA
Section number(s)incomplete	is/are	RETURN T	
Explanation:		**************************************	-
Please provide the additional information requ(a		your application l	by
Ecology staff	Date	e	

Use this page to continue your answers to any questions on the application. Please indicate section number

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).